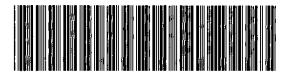
P02000031166

(Re	questor's Name)	
(Ad	dress)	
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JUL 15 2016 C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GR	ACIANO SERVICE	S, CORP.	
	00031166		
The enclosed Articles of Amendment a	and fee are submitted for filing.		
Please return all correspondence conce	rning this matter to the followin	g:	
LUIS JAC	ОВО		
JACOBO	Name of Conta		
	Firm/ Com	рапу	····
6220 W 2	1ST COURT		
HIALEAH	Addres 1, FL 33016	S	
	City/ State and	Zip Code	
INFO@JACC	DBOTAX.COM		
_	ress: (to be used for future annu	al report notificati	on)
For further information concerning this	matter, please call:		
LUIS JACOBO	at (30)5 , 556	6-0044
Name of Contact Perso	n	Area Code & Day	rtime Telephone Number
Enclosed is a check for the following a	mount made payable to the Flor	ida Department of	State:
■ \$35 Filing Fee □\$43.75 F Certificat	iling Fee & Status See of Status Certified Cop (Additional coenclosed)	y Certi py is Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy aclosed)
Mailing Address Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	ions	Street Address Amendment Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE OVISION OF CONFORATION

GRACIANO SERVICES, CORP.

2016 JUL 1 1 PM 1: 32

(Name of Corporation as currently filed with the Florida Dept. of State) P02000031166 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _, Florida New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee, \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe		
X Remove	\underline{V}	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	VP	SILVIA GRAC	IANO	12105 SW 43RD ST
Add				
Remove				MIAMI, FL 33175
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	,			
Add				
Remove				

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an in the amendment itself:

The date of each amendment(s) ad	option:	FILE JEÖRFTARY TOURION OF OV	LL/ id other than the
date this document was signed.		——————————————————————————————————————	
Effective date if applicable:		2016 JUL 1 I	PM 1: 32
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amen ficient for approval.	dment(s)	
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(
"The number of votes cast f	for the amendment(s) was/were sufficient for approval		
by	,,		
•	(voting group)		
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and sha	reholder	
The amendment(s) was/were adoption was not required.	pted by the incorporators without shareholder action and shareho	lder	
Dated_06/29/20	016		
Signature	Mily		
(By a di selected	rector, president or other officer – if directors or officers have no l, by an incorporator – if in the hands of a receiver, trustee, or oth ed fiduciary by that fiduciary)		
	LIBARDO D GRACIANO		
-	(Typed or printed name of person signing)		
	PRESIDENT		
•	(Title of person signing)		